

ENLISTED PROMOTION/CONSIDERATION DECLINATION STATEMENT

For use of this form, see AR 600-8-19; the proponent agency is DCS, G-1

1. NAME	2. SSN	3. RANK
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4. I DECLINE PROMOTION CONSIDERATION TO THE RANK OF:

a. _____ (initial) SFC, MSG, or SGM. I understand that this declination is irrevocable and will be filed in my Automated Human Resource Record prohibiting my consideration on future boards until withdrawn. I also understand that under no circumstances will I be authorized a Senior Enlisted Standby Advisory Board as a result of not being considered for this board.

b. _____ (initial) SGT or SSG I may decline consideration for promotion before my promotion packet is assembled and sent to the promotion board. Once the packet is sent to the board, I cannot decline consideration. If selected and placed on the Permanent Promotion Recommended List (PPRL) I may request removal from the list. The declination will remain in effect for any subsequent boards until I request board consideration.

c. Signature of Soldier	d. Date signed (YYYYMMDD)
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5. I DECLINE PROMOTION TO THE RANK OF:

a. _____ (initial) SFC, MSG, or SGM I understand that by declining this promotion, I may be removed from the selection list. I also understand that if removed from the selection list, due to declining a promotion and reassignment to a unit position that is within a reasonable commuting distance (as defined in AR 140-10) or elected mileage, my removal from the recommended list will result in a non-promotable status for 1 year. COMPLETE REASON BELOW:

b. _____ (initial) SGT or SSG I understand that by declining this promotion, I may be removed from the selection list. I also understand that if removed from the selection list, I may be recommended for promotion at any time after the last day of the month in which I signed the declination of promotion. COMPLETE REASON BELOW

c. Reason(s) for declination: _____

d. Enter the declined position information below.

Unit	UIC	POSN	PARA	LN
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e. Signature of Soldier	f. Date signed (YYYYMMDD)
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6. WITNESS VERIFICATION

a. Printed Name	b. Rank	c. Unit
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I certify the signature appearing on the above statement is in fact the Soldier's signature. I personally observed the Soldier sign this statement.

d. Signature of Witness	e. Date signed (YYYYMMDD)
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10 Dec 15

Previous editions of this form are obsolete.